

**Application Data Sheet**  
**Under 37 C.F.R. § 1.76**

**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title :: SYSTEM AND METHOD FOR SINGLE  
SECURITY ADMINISTRATION

Attorney Docket Number:: BEAS-01416US1

Request for Early Publication?:

Request for Non-Publication?:

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 2

Small Entity?:

Latin name::

Variety denomination name::

Petition included?:

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:

## **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::**  
**Status::** Full Capacity

**Given Name::** Hong-Hsi  
**Middle Name::**  
**Family Name::** Lo  
**Name Suffix::**  
**City of Residence::**  
**State or Province of Residence::**  
**Country of Residence::**  
**Street of mailing address::**  
**City of mailing address::**  
**State or Province of mailing address::**  
**Country of mailing address::**  
**Postal or Zip Code of mailing address::**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::**  
**Status::** Full Capacity

**Given Name::** Rich  
**Middle Name::**  
**Family Name::** Lee  
**Name Suffix::**  
**City of Residence::**  
**State or Province of Residence::**  
**Country of Residence::**  
**Street of mailing address::**  
**City of mailing address::**

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

## Correspondence Information

Correspondence Customer Number :: 23910

Name:: Sheldon R. Meyer

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Suite 400

City of mailing address:: San Francisco

State or Province of mailing address:: California

Country of mailing address:: US

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Fax Number: 415-362-2928

E-Mail address:: kfk@fdml.com, srm@fdml.com

## Representative Information

Representative Customer Number::	23910	
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## Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 U.S.C. 119(e)	60/432,125	12/09/2002

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

## **Assignee Information**

**Assignee name::**

**Street of mailing address::**

**City of mailing address::**

**State or Province of mailing address::**

**Country of mailing address::**

**Postal or Zip Code of mailing address::**